

State of Minnesota  
HOUSE OF REPRESENTATIVES

EIGHTY-NINTH SESSION

H. F. No. 1943

03/17/2015 Authored by Anderson, S.,  
The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act  
1.2 relating to health; amending the quality of care complaint process; proposing  
1.3 coding for new law in Minnesota Statutes, chapter 62D.  
1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. **[62D.115] QUALITY OF CARE COMPLAINTS.**

1.6 Subdivision 1. **Quality of care complaint.** For purposes of this section, "quality of  
1.7 care complaint" means any grievance regarding a provider within the network and services  
1.8 rendered by that provider to enrollees with potential or actual adverse outcomes to the  
1.9 enrollee. Quality of care complaints may include but are not limited to provider and staff  
1.10 competence, appropriateness, communications, behavior, or facility and environmental  
1.11 considerations including but not limited to cleanliness, lack of areas for confidential  
1.12 communications, or unsafe conditions for patients.

1.13 Subd. 2. **Quality of care complaint investigation.** (a) Each health maintenance  
1.14 organization shall develop and implement policies and procedures for ongoing monitoring  
1.15 of quality of care complaints and take appropriate action when it identifies occurrences of  
1.16 poor quality. This includes collecting and reviewing complaints, collecting and reviewing  
1.17 information from identified adverse events, and implementing appropriate interventions  
1.18 when it identifies patterns of poor quality.

1.19 (b) The commissioner of health shall advise a complainant of the process followed  
1.20 by the health maintenance organization in reviewing a quality of care complaint. The  
1.21 process shall include a written notice indicating which items were reviewed by the  
1.22 commissioner. Nothing in this section shall be construed to allow the commissioner to  
1.23 share private or protected data as defined in chapter 13 or 145.

- 2.1            (c) To enforce the requirements of this section, the commissioner of health may  
2.2            access the information, documents, or records acquired by a review organization as  
2.3            permitted by law, and the final determination of the quality of care complaint.